

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD		5-31-00
O.I.P.E. CLASSIFIER			6-13-00
FORMALITY REVIEW		714435	8/14/00
RESPONSE FORMALITY REVIEW		714716	2/15/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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APPLICANT  
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TITLE APPLICANTS

INVENTOR  
NAME

CLASS

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**WARNING**  
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Form PTO-437  
(Rev. 6/99)